(b) if so, the details thereof;

(c) if not, the steps being taken by Government for the welfare of 50 thousand children dying every year in the country from cancer;

(d) whether Government are concerned regarding the number of child hospitals and providing modern treatment systems, specialists etc. in the present child hospital; and

(e) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) No, Sir, However, under the scheme 'Health Minister's Discretionary Grant, financial assistance is granted to the poor and needy patients to meet a part of expenditure on hospitalization for undergoing major surgical interventions and treatment of major diseases including cancer. Further, under the scheme 'Rashtriya Arogya Nidhi', financial assistance is provided to poor patients, living Below Poverty Line. This assistance is extended to those who suffer from major life threatening diseases, including cancer and receiving medical treatment at any super speciality Government Hospital.

(d) and (e) The treatment of cancer is by surgery, radiotherapy, chemotherapy and supportive care. The treatment of childhood cancers is also similar to adult cancer and requires multi speciality support. Under the National Cancer Control Programme (NCC) financial assistance is provided to the Government Hospitals for cancer care.

Sickle Cell Research Centres

665. SHRI R.S. GAVAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Sickel Cell had affected large number of people in 12 States and a Union Territory in India;

(b) if so, whether Government have any proposal to establish Sickle Cell Research Centres in different parts of the country;

(c) if so, the details thereof; and

(d) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (d) Sickle Cell Anemia is prevalent in various states viz., Maharashtra, Gujarat, West Bengal, Punjab, Karnataka, Tamil Nadu, Orissa, Chhattisgarh, Madhya Pradesh and Bihar, as per studies conducted by the Indian Council of Medical Research (ICMR) through multicentric projects in these States. The disease is also reported to be prevalent in other States like Uttar Pradesh and Kerala by various scientists working in the area. ICMR has already established research centres in 10 states for carrying out research on haemoglobinopathies, which include Sickle Cell Anemia and Thalassemia. Council has completed a screening programme in tribal population followed by simple intervention method to reduce the sickle cell crisis in the affected children. The Council also proposes to establish molecular diagnostic facilities in these centers and to identify new centers in other states like Rajasthan.

National AIDS Control Programme

666. SHRI NANDI YELLAIAH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether government have completed the process of formulating the plan for phase-III of the National AIDS Control Programme (NACP) and evolved the national functional frame for implementing it;

(b) if so, the details in this regard, indicating the names of the States which are to be given priority in this phase;

(c) the details of the scheme, if any, proposed by the government of Andhra Pradesh for inclusion in phase-III of NACP; and

(d) the decision of Government thereon?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) The process for formulating the Phase-III of the National AIDS Control Programme is yet to be completed. Based on participatory and consultative process involving the states, development partners and the civil society, including people living with HIV/AIDS (PLHA), a strategic Framework outlining the vision, goal, objectives and thrust areas for NACP-III has been evolved.